

1. CIR./DIST./DIV. CODE	2. PERSON REPRESENTED Richard Joseph			VOUCHER NUMBER																																																																																										
3. MAG. DKT./DEF. NUMBER		4 DIST. DKT./DEF. NUMBER 14-CR-306	5 APPEALS DKT/DEF. NUMBER	6. OTHER DKT. NUMBER																																																																																										
7. IN CASE/MATTER OF (Case Name) USA v. Richard Joseph		8 PAYMENT CATEGORY <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Petty Offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Other <input type="checkbox"/> Appeal	9 TYPE PERSON REPRESENTED <input checked="" type="checkbox"/> Adult Defendant <input type="checkbox"/> Appellant <input type="checkbox"/> Juvenile Defendant <input type="checkbox"/> Appellee <input type="checkbox"/> Other	10 REPRESENTATION TYPE (See Instructions) CC																																																																																										
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list up to five major offenses charged, according to severity of offense. 18:2250(a) Failure to Register as a Sex Offender																																																																																														
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix), AND MAILING ADDRESS Timothy M. Donohue, Esq. 622 Eagle Rock Ave. West Orange, NJ 07052		13. COURT ORDER <input checked="" type="checkbox"/> O Appointing Counsel <input type="checkbox"/> Co-Counsel <input type="checkbox"/> F Subs For Federal Defender <input type="checkbox"/> Subs For Retained Attorney <input type="checkbox"/> P Subs For Panel Attorney <input type="checkbox"/> Standby Counsel Prior Attorney's Name: Appointment Dates: <input type="checkbox"/> Because the above-named person represented has testified under oath or has otherwise satisfied this Court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in Item 12 is appointed to represent this person in this case, OR <input type="checkbox"/> Other (See Instructions) Signature of Presiding Judge or By Order of the Court 3/10/15 Date of Order Repayment or partial repayment ordered from the person represented for this service at time appointment. <input type="checkbox"/> YES <input type="checkbox"/> NO Nunc Pro Tunc Date																																																																																												
CLAIM FOR SERVICES AND EXPENSES <table border="1"> <thead> <tr> <th>CATEGORIES (Attach itemization of services with dates)</th> <th>HOURS CLAIMED</th> <th>TOTAL AMOUNT CLAIMED</th> <th>MATH/TECH. ADJUSTED HOURS</th> <th>MATH/TECH. ADJUSTED AMOUNT</th> <th>ADDITIONAL REVIEW</th> </tr> </thead> <tbody> <tr> <td>In Court</td> <td>a. Arraignment and/or Plea b. Bail and Detention Hearings c. Motion Hearings d. Trial e. Sentencing Hearings f. Revocation Hearings g. Appeals Court h. Other (Specify on additional sheets)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td>(RATE PER HOUR = \$) TOTALS:</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Out of Court</td> <td>a. Interviews and Conferences b. Obtaining and reviewing records c. Legal research and brief writing d. Travel time e. 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